



Trials@Home proof-of-concept study RADIAL is ready for patient recruitment

21st June 2023



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Trials@Home project

The aim

Provide recommendations on Decentralised Clinical Trials (DCTs) in Europe

Project start September 1, 2019, due to end August 31, 2024

The consortium



Agenda

| Topic | Presenter | Time |
|---|-----------------------------|------------------------|
| Welcome | Petra Naster | 15:00 - 15:05 (5 min) |
| The <i>why</i> and <i>how</i> of RADIAL | Mira Zuidgeest | 15:05 - 15:15 (10 min) |
| The co-creation of RADIAL | Megan Heath & Sabine Dupont | 15:15 - 15:25 (10 min) |
| Decentralised Elements and Technology | Bart Lagerwaard | 15:25 - 15:35 (10 min) |
| Q&A | Petra Naster | 15:35 - 16:00 (25 min) |

The *why* and *how* of RADIAL



Presenter



Mira Zuidgeest

Associate Professor

University Medical Center

Utrecht, NL

Academic lead Trials@Home &

RADIAL PI

The *why* of the T@H RADIAL proof-of-concept study



aims to assess the scientific and operational quality of a fully decentralised and hybrid trial approach compared to a conventional trial approach

Primary study objective 1

To explore potential benefits of DCT approaches on participant recruitment, retention, diversity, site and patient satisfaction, and cost.

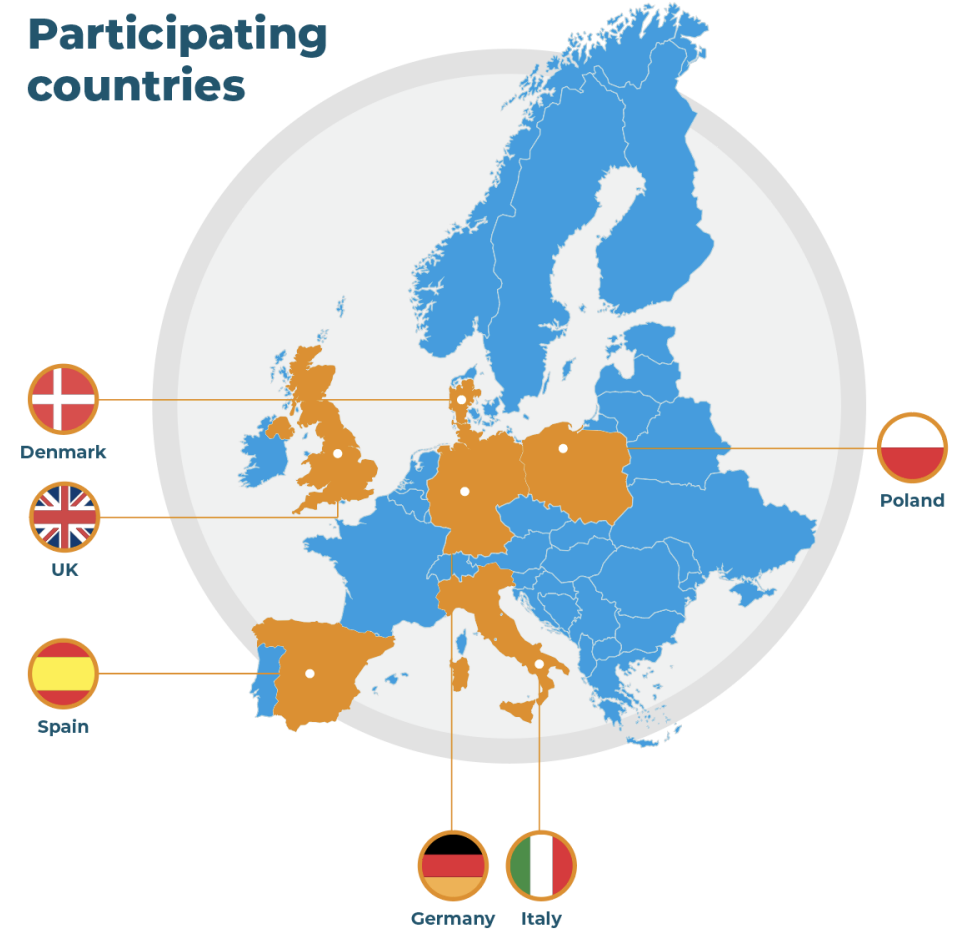
Primary study objective 2

To evaluate acceptability of DCT approaches by measuring variables related to safety oversight, treatment adherence and data quality

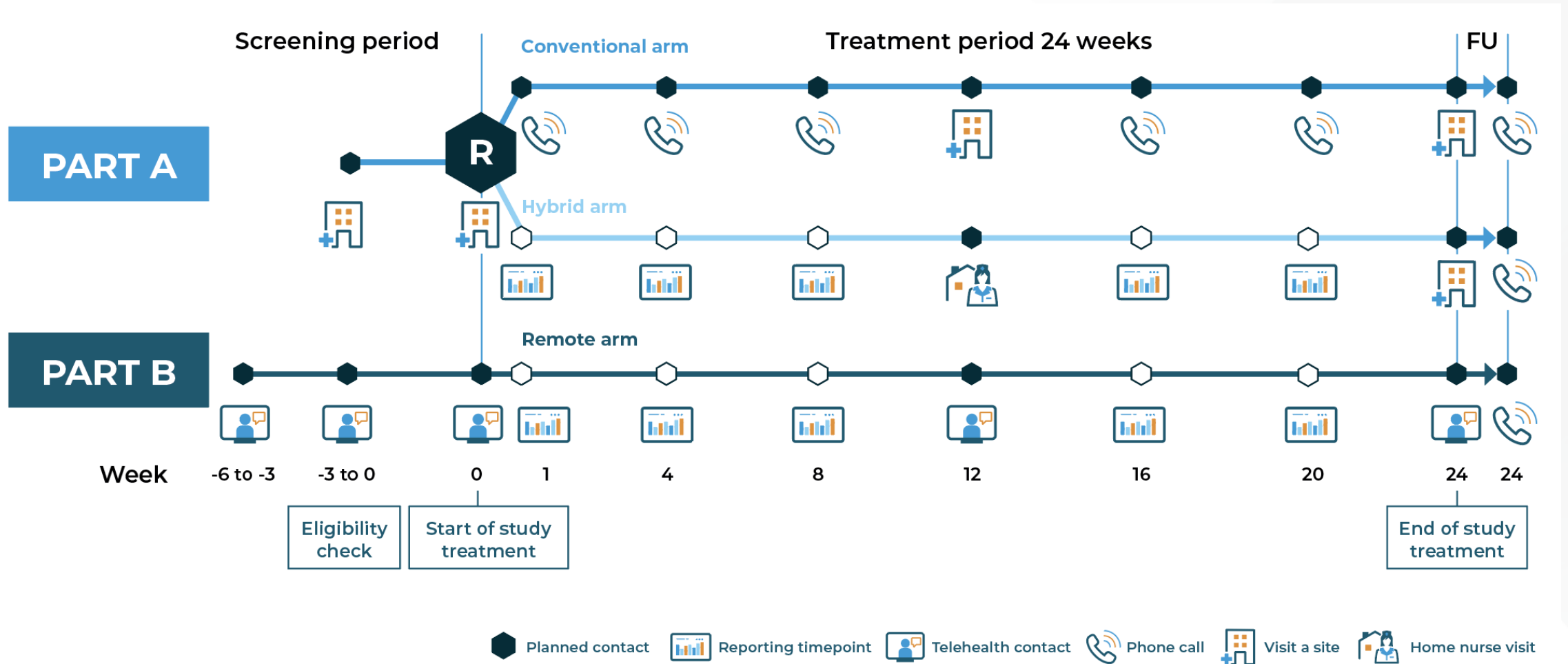
The *what* of the T@H RADIAL proof-of-concept study

- Pan-EU, Parallel-group, open-label, multi-centre study
- People with type 2 diabetes (with Hb1Ac 7-10%)
 - Switch long-acting insulin
 - Phase IV study
- Composed of 2 parts with 3 different arms:
 - **Part A** - Site-based recruitment
 - Conventional arm (x150)
 - Hybrid arm (x150)
 - **Part B** - Recruitment performed remotely
 - Remote arm (x300)

Participating countries



The *how* of the T@H RADIAL proof-of-concept study



Important RADIAL features

Approved proof-of-concept study

Methodological objective with KPIs as main outcomes

Low intervention phase IV trial

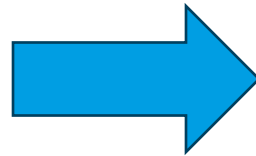
IMP used within the market authorisation label

Population familiar with insulin

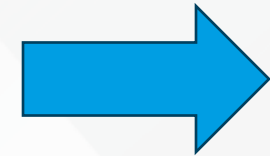
People with type 2 diabetes with Hb1Ac 7-10% already using long-acting insulin

Key Performance Indicators as main outcomes

Hybrid and DCT approaches need to meet the same **Key Performance Indicators (KPIs)** as conventional trial approaches for generating **valid and appropriate data** to allow drawing appropriate conclusions from the study results

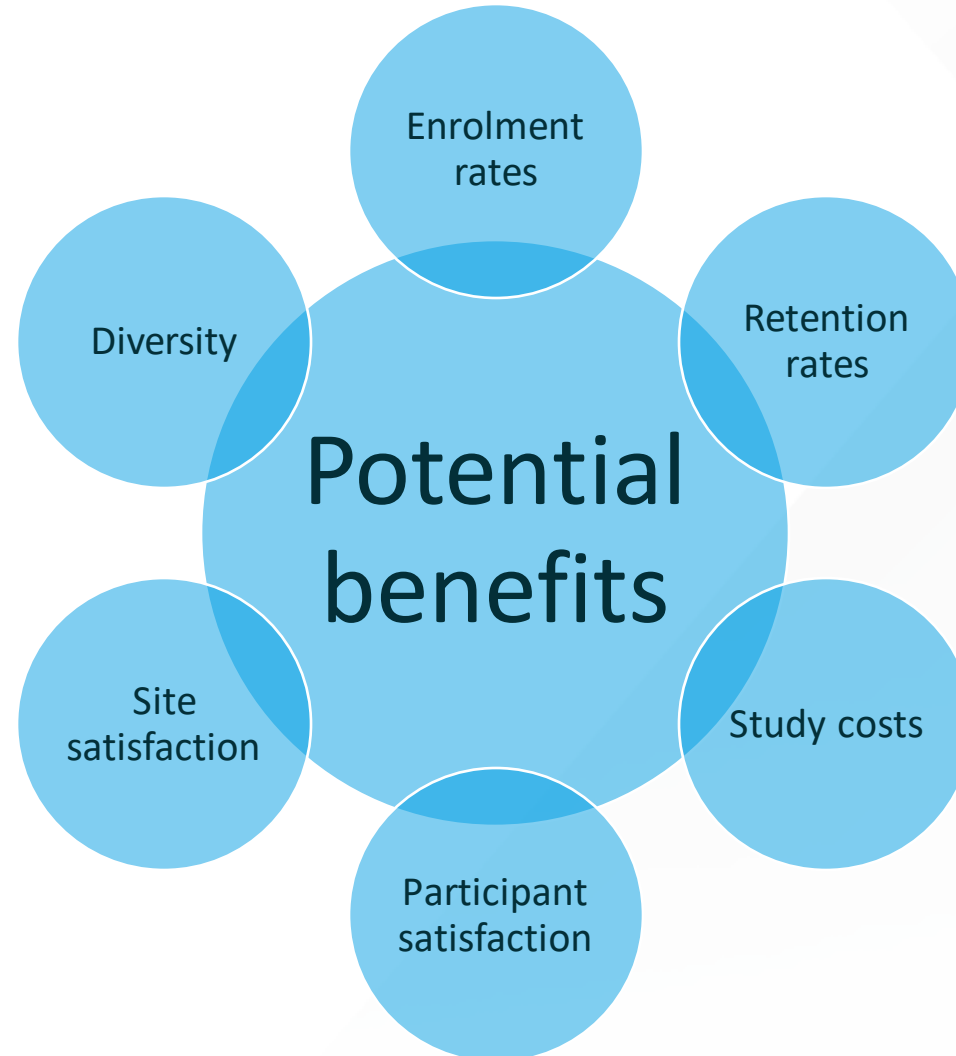


The RADIAL study will focus on the characterisation and evaluation of recognised **KPIs which reflect scientific and operational quality of clinical trials**



RADIAL primary study objective 1

To explore potential benefits of DCT approaches on participant recruitment, retention, diversity, site and patient satisfaction, and cost.



RADIAL primary study objective 2

To evaluate acceptability of DCT approaches by measuring variables related to safety oversight, treatment adherence and data quality



Delphi expert panel to determine threshold levels of acceptability for these KPI for this study



The Co- Creation of RADIAL



Presenters



Sabine Dupont

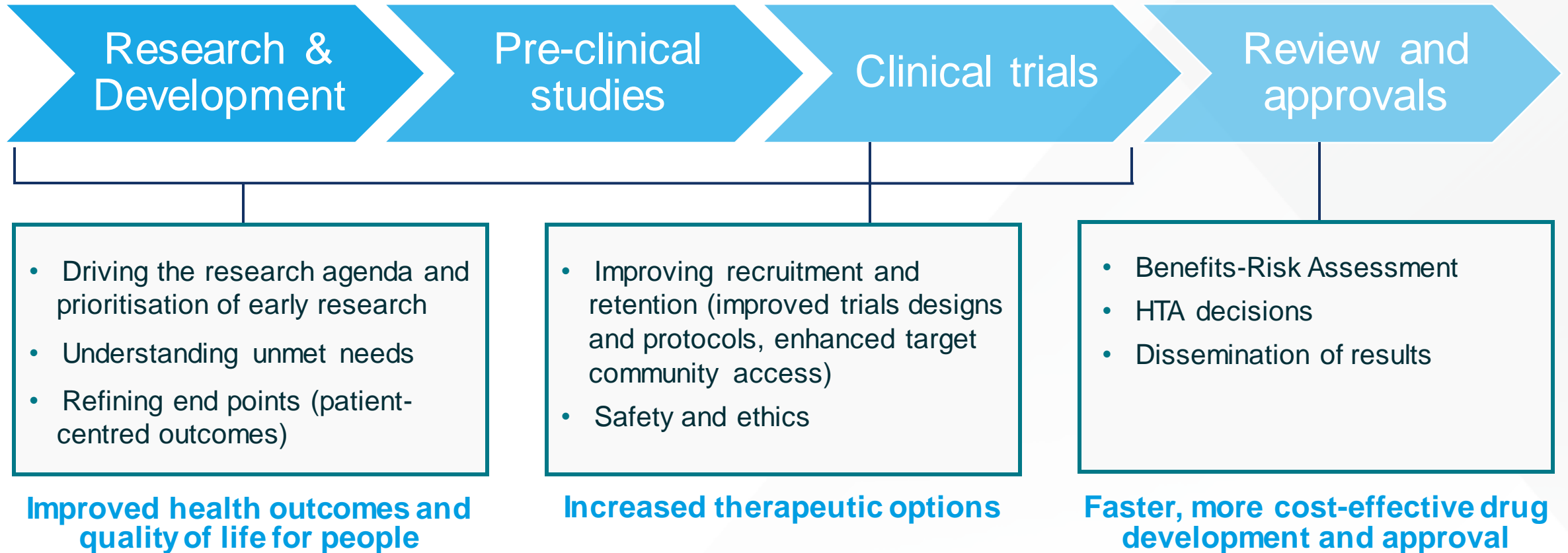
Director Policy & Strategy
International Diabetes
Federation Europe
IDF Europe Lead



Megan Heath,

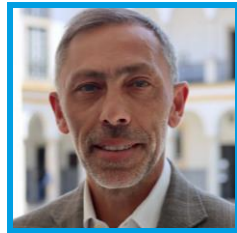
Head Clinical Study Units
Europe Region,
Sanofi

How are people with lived experience engaged in research projects – roles and benefits



How PwD participate in Trials@Home – The Patient Expert Panel

The Patient Expert Panel (PEP) is composed of **seven PwD** representative of the community in Europe plus **one IDF Europe coordinator**:



**PATIENT
EXPERT
PANEL**

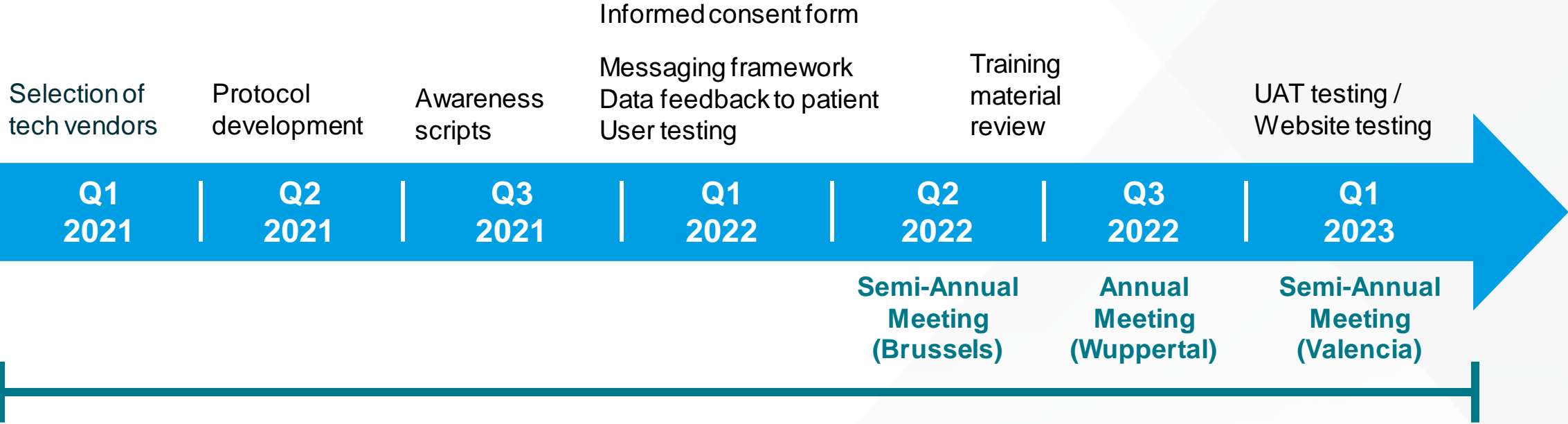
How PwD participate in Trials@Home – The Patient Expert Panel

The PEP provides advice, insights and inputs into all Trials@Home Work Packages through ongoing, regular participation as well as through special projects/initiatives.

The PEP ensures that the experiences, needs and perspectives of people living with diabetes are reflected **at all stages** of the research and project development process and during the dissemination phase.

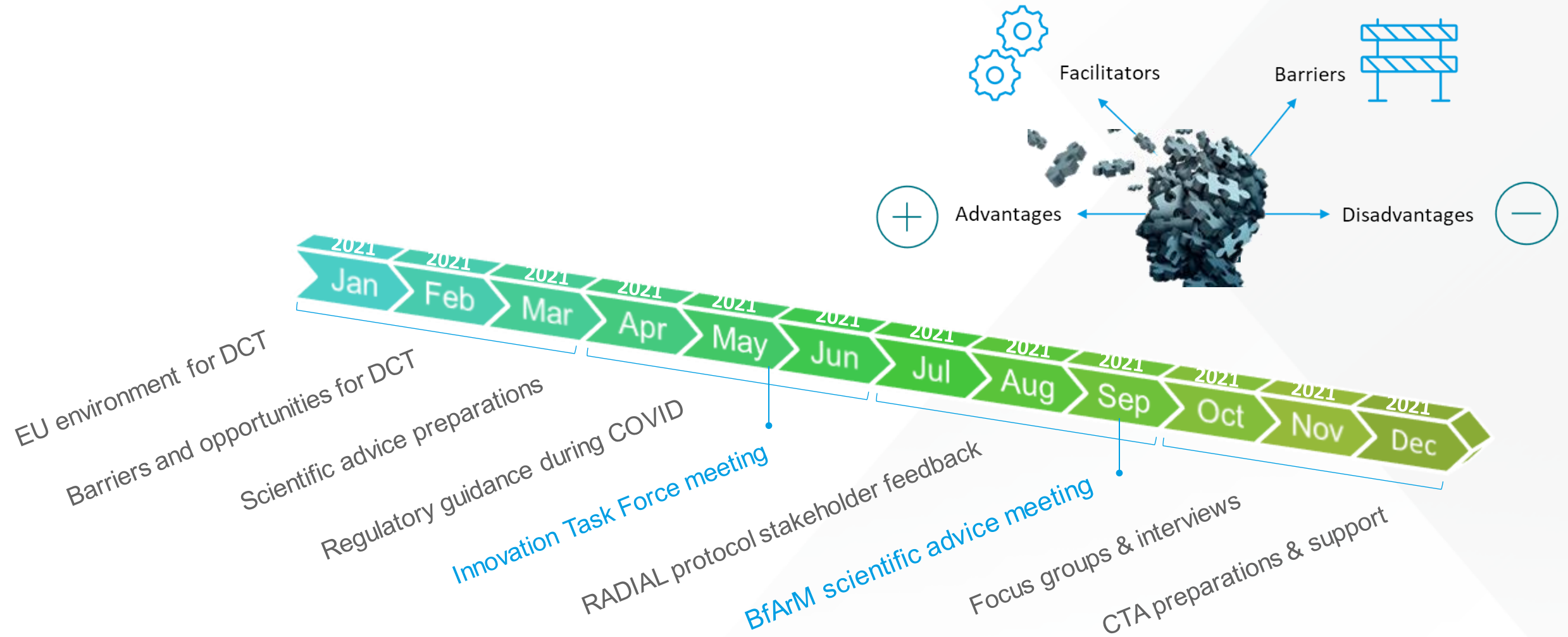


PEP Engagement – structure & examples



Active participation of the PEP throughout the project, embedded in **WP2, WP3, WP4** and **WP5** and in **Annual/Semi-Annual Meetings**

Our Co-Creation Journey



Summary of key Regulatory considerations for DCT



Onboarding, training & consent

- Compliance with divergent national regulations in a heterogenous EU environment



Investigator responsibilities per ICH GCP

- Need to ensure adequate Investigator oversight of remote participants, personnel and procedures



Safety and efficacy

- Adverse event reporting in remote setting, comparability of assessments in clinic vs. at home



Data integrity, participant rights & privacy

- ID verification, appropriate data access & hosting, GCP compliance & inspections

Decentralised Elements & Technology



Presenters



Bart Lagerwaard

Assistant Professor

University Medical Center Utrecht

Scientific coordination RADIAL


Decentralised elements in RADIAL

PART B



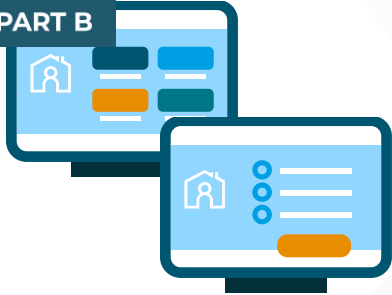
eConsenting and eSignature

PART B



Telemedicine

PART B



Online recruitment and pre-screening

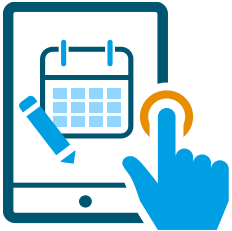
PART A



Home nurse visits



Remote monitoring IMP adherence



Study app for reporting (S)AEs and ePROs



Direct to patient shipment of IMP

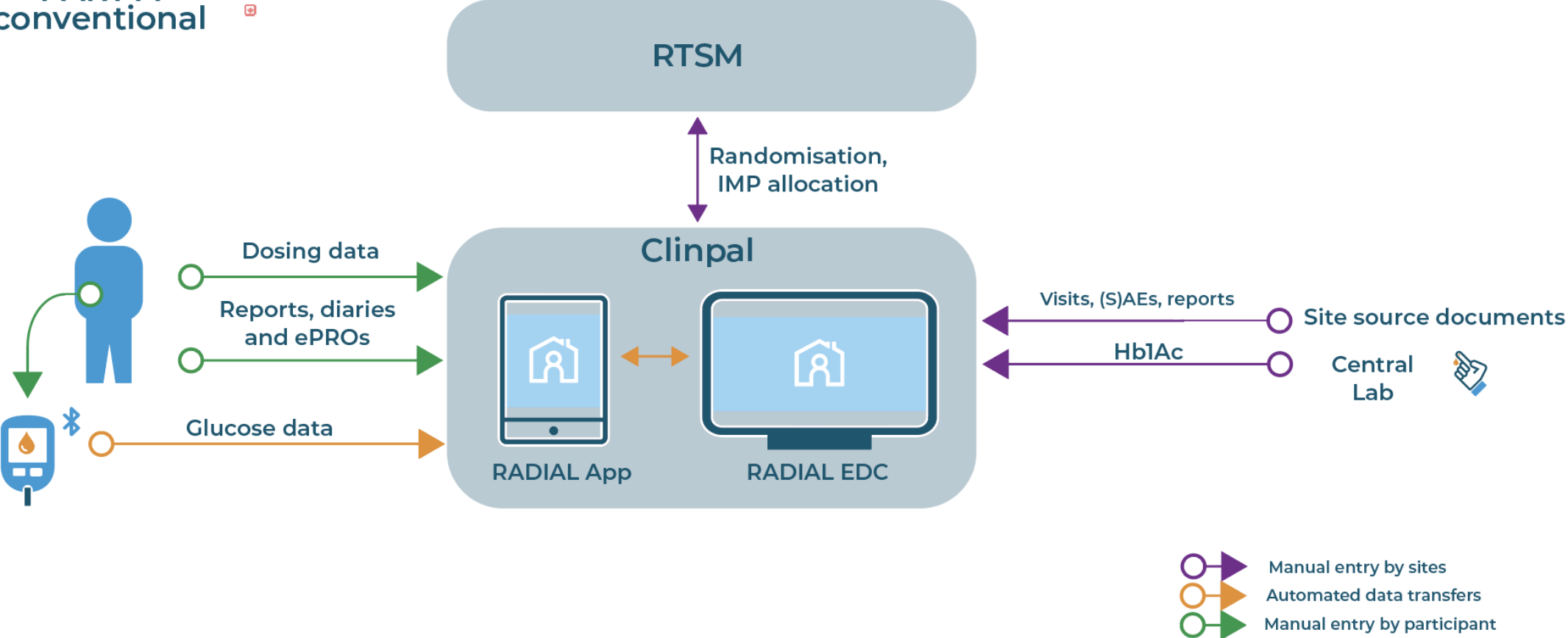


At home sample collection

Decentralised elements and complexity ...

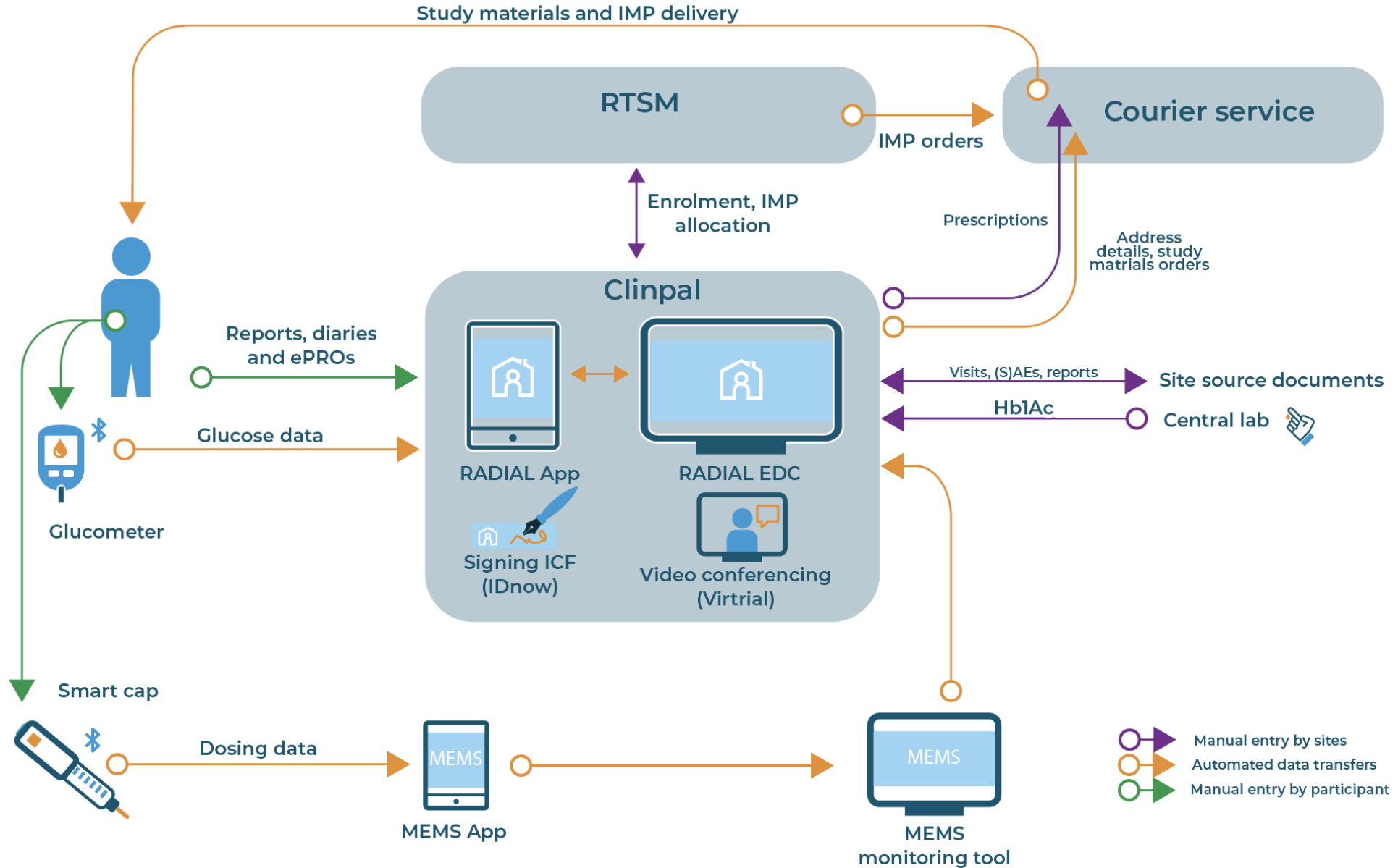
Overview of systems

PART A conventional



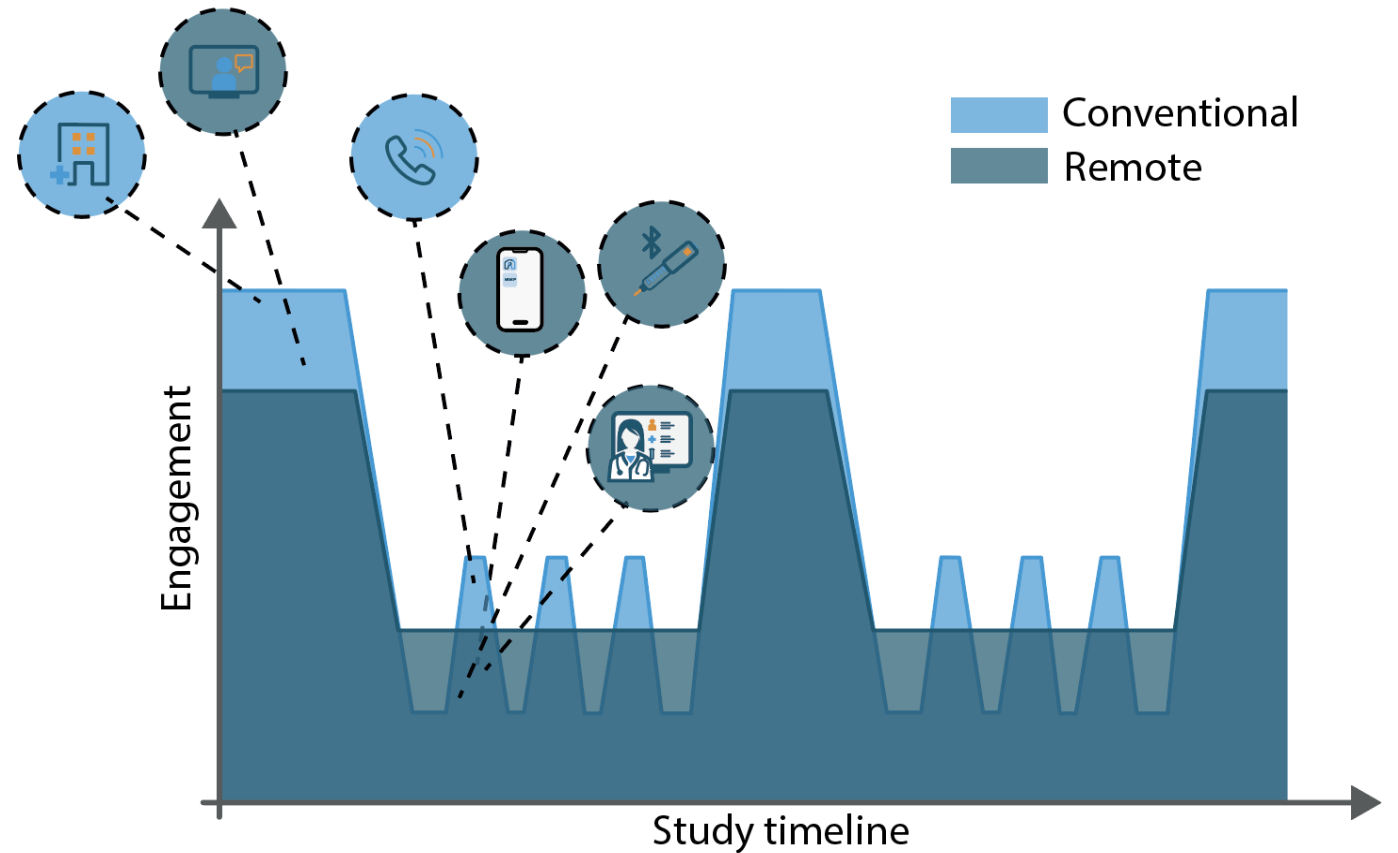
Overview of systems

PART B



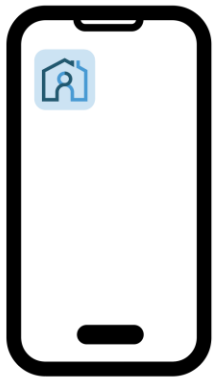
Investigator oversight in a DCT (RADIAL)

- In a conventional trial, the participant is most of the time 'remote' (not at the clinical trial site).
- Using (novel) technology the remote participant can be brought 'closer' to the investigator

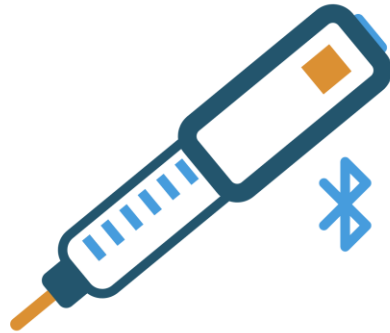


How to maintain oversight when participants are remote?

- In decentralised/hybrid arm, the investigator has access to tools to maintain oversight – even though the participant does not physically visit the site.



Continuous reporting



Remote Data collection

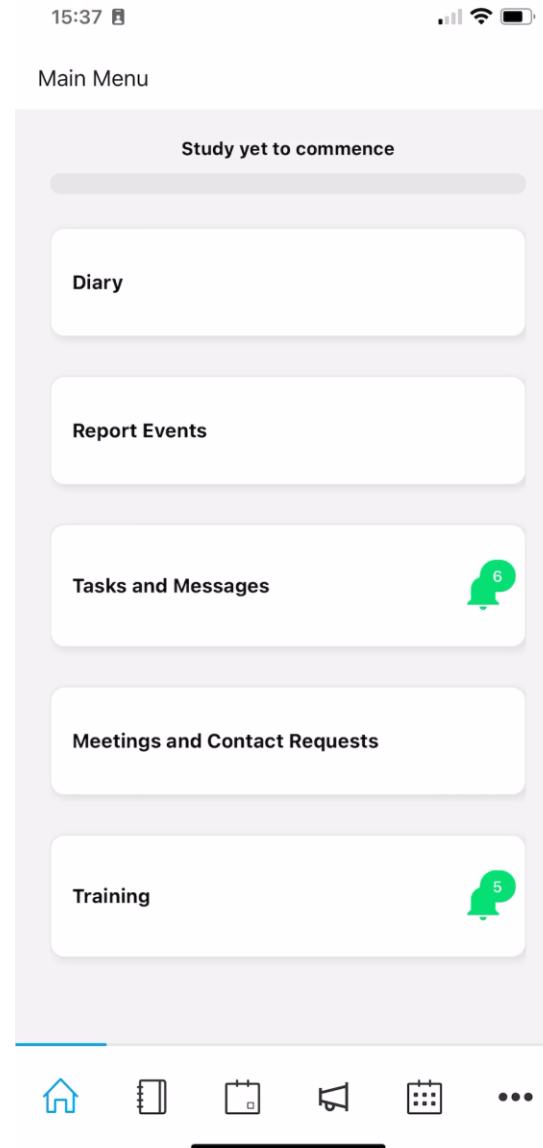


Remote monitoring



(Ad hoc)
Telemedicine or phone call

Continuous reporting



Remote data collection and monitoring

MAIN MENU

Home Page

Patients list 7

Help

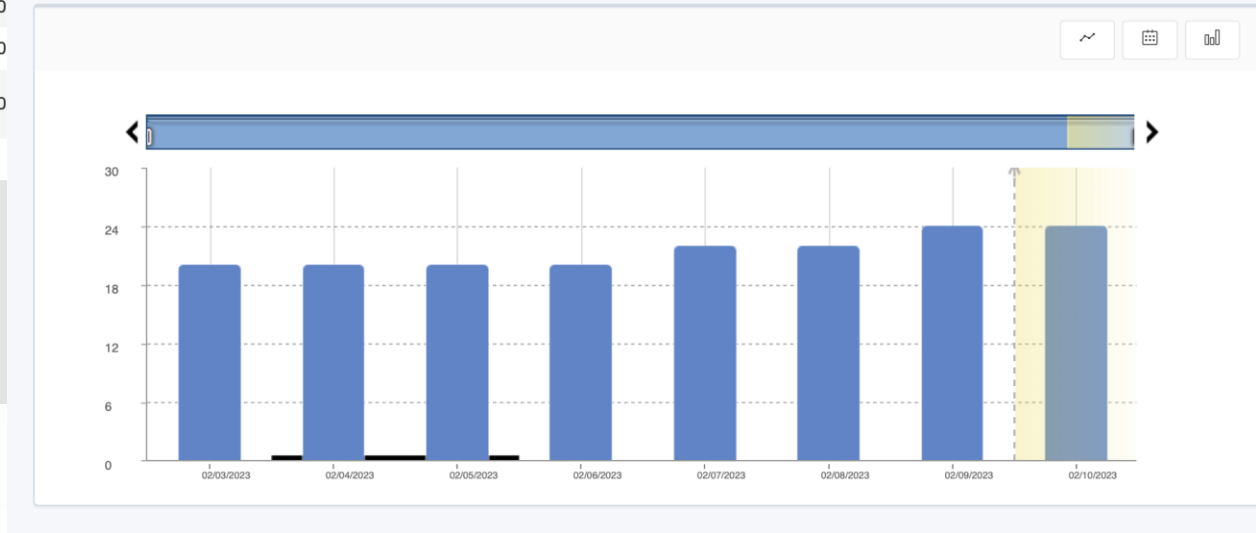
Custom filters

Patients Adherence status

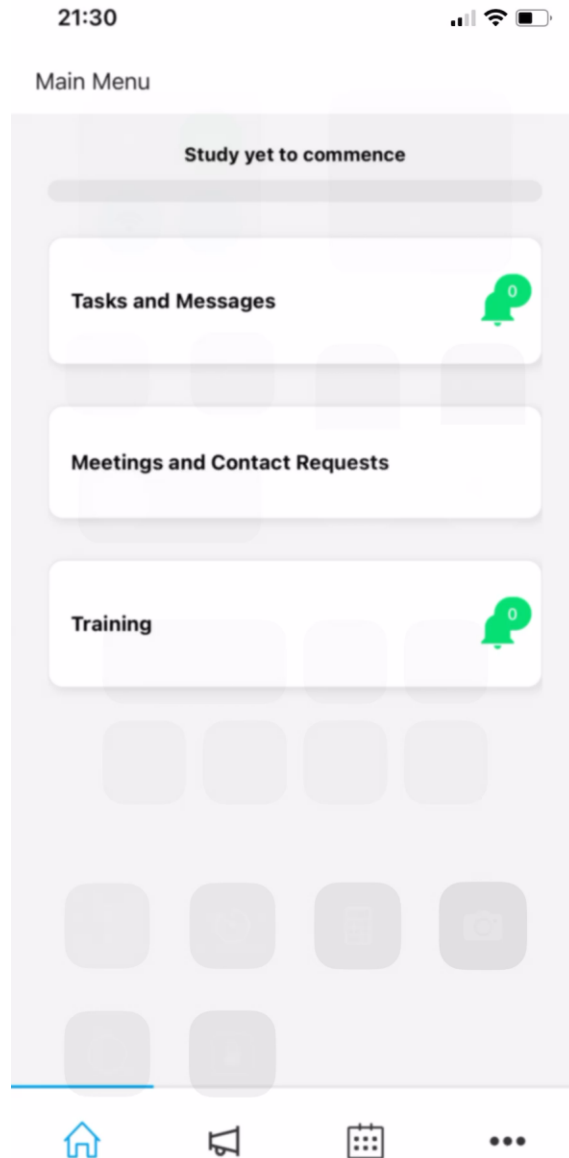
(All sites) Quick search Refresh

Drag a column header and drop it here to group by that column

| | Site | Patient code | CID | Last read | From date | To date | Adherence level | Last adherence status |
|---|--------------|--------------|----------|---------------------|---------------------|---------------------|-----------------|--|
| ▶ | 995_UseCases | UC1-OK | 2c999900 | 10/02/2023 10:00:07 | 03/02/2023 00:00:00 | 10/02/2023 23:59:59 | 100 % | No deviation ★ |
| ▶ | 995_UseCases | UC2-SUB | 2c999901 | 10/02/2023 15:00:00 | 03/02/2023 00:00:00 | 10/02/2023 23:59:59 | 0 % | Suboptimal adherence ★ |
| ▶ | 995_UseCases | UC3-TIT | 2c999902 | 10/02/2023 15:00:00 | 03/02/2023 00:00:00 | 10/02/2023 23:59:59 | 100 % | Potential titration in the last 7 days ★ |
| ▶ | 995_UseCases | UC4-MAN | 2c999903 | 10/02/2023 15:00 | | | | |
| ▶ | 995_UseCases | UC5-MUL | 2c999904 | 10/02/2023 15:00 | | | | |
| ▶ | 995_UseCases | UC6-ABS | 2c999905 | 05/02/2023 15:00 | | | | |
| ▶ | 995_UseCases | UC7-DYN | null | null | | | | |



Telemedicine



A remote site, a 24/7 clinical trial site?

- We cannot expect real-time review and follow-up on collected data and reports
- Risk-based approach
- Expectation management (for both site and participant)



Weekly 'digests'
of dosing data

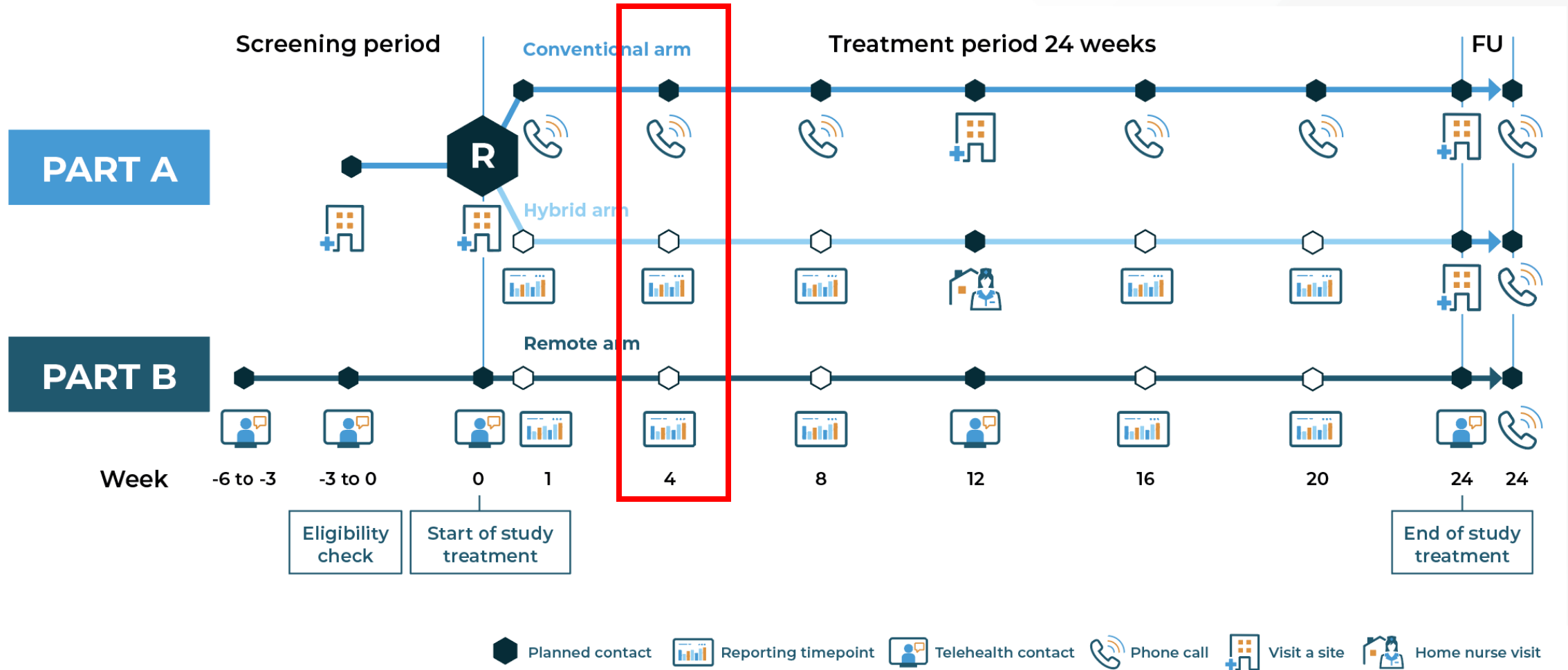


Automated
alerts and
notifications






Reporting
timepoints



The *how* of the T@H RADIAL proof-of-concept study



Messaging and Reminders


15:46   

Tasks and Messages



 

Reporting of measurements, dosage and events
You have now been using Toujeo® for one week. Did you report all the changes in medications, medical events and hypos (if they occurred)? Please check this and afterwards confirm by clicking 'proceed' below.

[PROCEED](#)

15:59   


Tasks and Messages

Reporting of measurements, dosage and events (R3)


Please contact the study team in case of questions.

I confirm that my data is complete (medical events, changes in medication, hypo form, if applicable)

[SUBMIT](#)

26-May-2023 13:59:05 UTC

 Important [more >](#)

REPORTING TIMEPOINT [OPEN](#)
less than a minute ago




bart E10

Reporting time point



A reporting timepoint has been reported by participant [826990216](#). Please review the data as per protocol.

[DISMISS](#)


Notifications for Sites

15:40   


Add - Report Medical Event

←  



How severely are you affected by the medical event?

Mild 



What action was taken with the study drug as a result of this medical event?

Not applicable 

Did the medical event lead to any of the following?

✓ - select -

- Significant enough to lead you to seek advice from healthcare professional 
- Bad enough to be admitted to hospital or to seek emergency medical support 
- No doctor's consultation



A medical event has been reported by 826990216. It could qualify as a SAE based on the answers filled out in the form. Please review the form.

Current Status



Current status

Where are we now?

- Systems are in place and will go live soon
- Logistics all set with one exemption
- SIVs are being conducted

Where are we going?

- First country live: United Kingdom
- Second wave to go live: planned for second half July
- Third wave to go live: planned for August
- Country order depends on contracting & translations



Shaping the future of clinical trials

Further information on T@H and RADIAL

- Project website www.trialsathome.com
- Contact us at trialsathome@umcutrecht.nl



Thank you

